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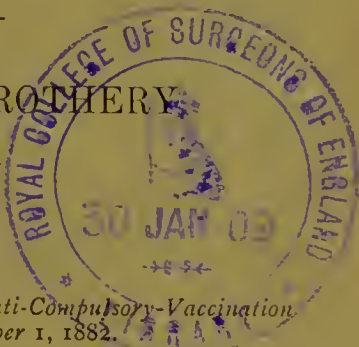
SWEDISH

SMALL-POX STATISTICS'

FRAUD:

THE REAL TRUTH OF THE MATTER.

BY
MRS. HUME-ROTHERY.



*(Reprinted from the National Anti-Compulsory-Vaccination
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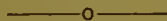
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SMALL-POX STATISTICS' FRAUD :

The Real Truth of the Matter.



DR. OIDTMANN, one of our most energetic and indefatigable fellow-workers in Germany, delivered a public address at Frankfort on the Vaccination Question on the 28th of August last. The principal feature of this address was a long and able dissertation on, and exposure of, the fraud perpetrated on the whole of Europe by the pro-vaccination party in the matter of the famous Swedish statistics. This fraud—in its origin probably only a misapprehension to which the wish might well be father, but which through persistent reiteration has degenerated into a fraud—took shape, we regret to say, in the first instance, in our English Parliamentary Report on Vaccination of 1857, issued under the direct responsibility of one whom we name with regret in such a connection—Mr. Simon, long head of the Board of Health and chief medical adviser of the Government. The table of Swedish statistics, published by him at pp. 185, 186 of the Blue Book in question, recording the small-pox mortality of Sweden, from 1749 to 1855, showed indeed as was

desired to be shown, a very great decrease in small-pox mortality from the beginning of the nineteenth century down to the year 1855 at which the table (then) inevitably closed ; but when a note by the Swedish Board of Health was appended to these tables stating that these documents "*need no comment TO PROVE BEYOND DOUBT the great influence of vaccination in Sweden as an invaluable though not absolute preventive against one of the most destructive diseases that ever afflicted mankind,*" — when such a note as this, we say, was appended *without comment on the glaringly false assumptions it parades*, then we say that nothing but a preconceived blind faith in vaccination could account, (in one whom we personally know to have been absolutely incapable of intentionally misleading the public mind) for such negligent reproduction of so glaring a fallacy by the compiler of this Report on Vaccination, who lay under the grave responsibility of furnishing the British Parliament with all the best light and information obtainable on so important a question. But to assume that these tables should have again and again been handled by pro-vaccination statisticians without detection or suspicion of this negligence, and of the utter misdirection of public opinion to which it led, till the fraud, whether intentional or unintentional, was exposed by Anti-vaccinators, is to make a heavy draft on the charity of those against whom such a weapon has been employed. And yet we are ourselves inclined to accept the assumption. Even learned men of science are prone to follow their leader like sheep, (or geese?) especially if that leader be taking the direction in which they desire to follow. How utterly baseless and deceptive is the assertion above quoted that these Swedish statistics *prove* the value of vaccination, has now been publicly acknowledged by the pro-vaccination party in Germany ; Professor

Flinzer having openly stated at the Medical Congress at Eisenach in 1879, that "if one looks over these tables (reprinted in Germany, from the English Blue Book, by Küssmaul) one is convinced *that the ebb-curve* of small-pox mortality set in long before any results of vaccination were possible." But as the *English* pro-vaccination party still unscrupulously parades these Swedish statistics, it will not be amiss to give the English public a little more information on the subject. Not very long since a writer in the *Times* (Sept. 7th) promulgated the amazing falsehood that "in Sweden the effect of authoritative vaccination had been to reduce an average of mortality for small-pox for 20 years from 12000, to 11 ;* and doubtless thousands of unfortunate dupes swallowed the preposterous assertion, any correction or refutation of which was, of course, refused insertion by the great mock Jupiter. Let us see how the facts, or at least the figures, really stand. We are not at all fond of inflicting dry figures on our readers, but in this instance we must ask them to excuse our so doing, as it is impossible for us without this to lay the real truth of the matter before them.

The figures in our table up to the year 1855 are the same as those of the Blue Book or Parliamentary Report so often referred to ; those up to 1876 have been supplied to us from the official records by Dr. P. A. Siljeström, of Stockholm, an ex-Member of the Swedish Parliament.

* The same inventive and intelligent writer reduces Prussian small-pox mortality on a similar average of 20 years from 472 to 1 !—"forgetful all" that in the one year 1872 there died of small-pox in Prussia 69,839 persons ! It would take a long period to get an average of one out of that ! We may have something more to say about Prussian statistics on another occasion.

*Official Statistics of Small-pox Mortality in Sweden from
1800 to 1876.*

Year	Small-pox Deaths	Year	Small-pox Deaths	Year	Small-pox Deaths
1800	12,032	1826	625	1852	1,534
1	6,057	27	600	53	279
2	1,533	28	257	54	204
3	1,464	29	53	55	41
4	1,460	30	104	56	52
5	1,090	31	612	57	560
6	1,482	32	622	58	1,289
7	2,129	33	1,145	59	1,470
8	1,814	34	1,049	60	708
9	2,404	35	445	61	193
10	824	36	138	62	148
11	698	37	361	63	307
12	404	38	1,805	64	741
13	547	39	1,934	65	1,336
14	308	40	650	66	1,217
15	472	41	237	67	1,061
1816*	690	42	58	68	1,492
17	242	43	9	69	1,474
18	305	44	6	70	764
19	161	45	6	71	329
20	143	46	2	72	346
21	37	47	13	73	1,122
22	11	48	71	74	4,063
23	39	49	341	75	2,019
24	618	50	1,376	76	604
25	1,243	51	2,488		

It will be seen from a glance at the above table that though in one year (1800) a mortality of 12,032 deaths from small-pox is recorded, yet within the ten years following it fell (1810) as low as 824 and in 1811 and 12 to 698 and 404 respectively. An average of 12,000 for 20 years is therefore a simple

* In this year vaccination was made compulsory in Sweden.

absurdity.* It will further be seen that though in the year 1822 the mortality fell to 11, yet three years later in 1825 it rose again to 1243! So much for the average of 11 for 20 years! This, however, in passing. It is not the ludicrous mistakes fallen into by an unknown writer to the *Times* with which we are chiefly concerned, but rather with the general question as to what may be learned of vaccination from these Swedish statistics. And we may observe that though we have not thought it worth while to print them at length, we have before us, and may make casual reference to, the similar tables from the middle of the last century beginning with the year 1749. Nor have we thought it worth while to trouble our readers with the figures of population steadily rising from 2,347,303 in 1800 to 4,429,713 in 1876. For, as will be seen, this in no way affects the question of the influence of vaccination on small-pox. Because we concede from the outset that there has been a great decrease in small-pox-mortality in Sweden, deaths in 1800 having amounted to 12,032, and in the last great epidemic year 1874 only to 4,063, and in 1876 as may be seen only to 604; and *if this reduction could be proved or even rationally supposed to result from vaccination*, that reduction would be amply sufficient to establish the value of vaccination, without any multiplication by increase of population; whereas *if it be shown that such reduction is not and cannot be owing to vaccination*, the amount of the reduction—due to other causes—is quite immaterial to our argument. We must first beg our readers' attention to the fact that

* The highest average of small-pox deaths for even ten years recorded in Sweden, after the date when deaths from measles ceased to be reckoned as small-pox, that is, from 1779 to 1788 is 5179, and that for the following decade, 1789-98, is 3810.

Compulsory or "authoritative vaccination," to quote the *Times* writer once more, was only decreed in Sweden in the year 1816 ; (Dr. P. A. Siljeström on "The Vaccination Question," p. 22), and as the author remarks, "As it cannot be supposed that it was thoroughly introduced for a year or two after that, we shall probably be right if we reckon the general introduction of vaccination as comprised within the decade 1819-28." Now it will be at once seen that even in the year 1801 the small-pox mortality fell to 6057, almost one half, and in the year 1802 to 1,533 scarcely more than one-eighth of that of the year 1800. Now as vaccination was only just beginning to be heard of in England about that time, it cannot rationally be supposed to have reached Sweden ; indeed Dr. Siljeström informs us that though vaccination was beginning between 1809 and 1818 to be pretty generally practised, even that decade must be regarded as a transition period, while all before was a pre-vaccinational era. It is clear then that vaccination (unless indeed as a coming event casting its shadow before !) could have nothing whatever to do with this great decrease of seven-eighths of the small-pox mortality within two years. In the year 1814, two years prior to the introduction of Compulsory Vaccination, the small-pox mortality had even fallen to 308 ; but if it be suggested that the growing practice of vaccination, though still voluntary, might have to do with this, we must inquire, why then this growing practice permitted the death-rate to rise in 1815 and 1816 to 472 and 690 respectively ? It is admitted that in the year 1822 the small-pox mortality fell to 11, and this is of course assumed as a grand triumph of vaccination which had now been in full operation for some few years. But what then was Compulsory Vaccination about when only three years later, in 1815, the small-pox mortality rose to 1243, four

times that of 1814 before vaccination was compulsory at all, and greater by about an eighth than that of the year 1805 before vaccination had begun to be practised at all—viz., 1090? Again, if Compulsory Vaccination reduced small-pox mortality in 1829 to 53, why, while compulsory vaccination bore sway as before, do we find that mortality rising in 1833 to 1,145, and in 1838, 1839, to 1,805 and 1,934? These same fluctuations continue throughout the table. If in 1843, '44, '45, '46, we find the small-pox mortality sinking to the extremely low ebb of 9, 6, 6, and 2 for these years respectively, we again find it rising in 1850, '51, '52, to 1,376, 2,488, and 1,534. In 1855 the Blue Book table closed very gratifyingly, no doubt, for believers in the vaccination-superstition, with a small-pox mortality of only 41; but is it conceivable—we will rather say, would it, but for the known fact, have been conceivable—that men of common sense, not to say science, should have confronted the flagrant fact that in the year 1851, *after 35 years of compulsory vaccination*, supposed to have been more perfectly carried out in Sweden than in perhaps any other country, the small-pox mortality of 2,488 *more than doubled* that (1,090) of the year 1805 when vaccination in Sweden was still a thing of the future; and *yet* have promulgated these Swedish statistics as proof absolute of the value of vaccination? The records of the last twenty years up to 1876 present the same extraordinary fluctuations in small-pox mortality (with a very considerable general rise however as compared with the previous twenty). In 1856 there were 52; in 1859, 1,470; in 1862 there were 148 (the lowest figure subsequent to 1856) and in 1869, 1,474 deaths from small-pox in Sweden; finally in 1871 there were only 329, while in 1874 there were 4,063, sinking again in 1876 to 604, and in all probability the small-pox death-rate

has sunk still lower in the succeeding years for which we have as yet no records. Now can any human being ever so little accustomed to rational and logical reflection, suppose for one moment that Compulsory Vaccination which has, since the year 1816, been what we may call a constant factor in the case—a force, that is, in continual operation—can possibly account for the changes in the small-pox death-rate, which presents such utterly irregular and contradictory variations, such ups and downs as the above official tables record? If these tables prove anything in the matter they prove conclusively that Compulsory Vaccination most carefully and thoroughly carried on throughout a whole country, is absolutely unable to control small-pox or even to modify its effects. The number of deaths in the year 1874 falls not very much short of four times the number of deaths in 1805, years before the introduction of vaccination. Nor will the increase of population from 2,427,408 in 1805, to 4,341,559 in 1874 help pro-vaccination arguments here. The population *had not doubled*. The deaths had *very considerably more than trebled*; while in 1851 (the year in which the highest small-pox mortality had occurred previous to 1855 where the table published in our Blue Book closes) the population had risen from 2,427,408 to 3,517,759, that is, *not one-half*, while the small-pox deaths as already pointed out had *considerably more than doubled* (viz., risen from 1,090 to 2,488.) How then, it may well be asked, was it possible even in 1855 for pro-vaccinators to delude themselves, or to delude others into a belief that Swedish statistics argued in favour of compulsory vaccination? Would not a mere glance at the tables refute it? The question may well be asked and the answer is a painful one. It would hardly, we think, have been possible, even in an *expert-ridden* Legislature like our House of Com-

mons, *that is, if anyone ever read the Blue Book, or looked at its tables at all*,—but for a falsification of the date of the introduction of vaccination into Sweden (which Dr. Oidtmann's address above-mentioned has brought to our notice) in a coloured plate inserted in the guilty Blue Book in question ;—not relegated to the appendix with the tables we have been examining, but placed “ in the forefront of the battle ” at page 22 of the Report itself. This table is, we regret to find, coloured so as to *bring every year subsequent to 1801* under the supposed influence of the great enchanter, Vaccination ! thus hiding and giving the lie to the unwelcome fact, that by far the greatest and most rapid fall in small-pox mortality on record, viz., that from 1800 to 1805 took place not only before the decree of Compulsory Vaccination in 1816, but before vaccination could well have been much heard of in Sweden, let alone begun to be voluntarily practised in 1808 or thereabouts. We do not say that even had the date assigned in this coloured plate to the influence of vaccination been correct, there was not enough in the tabular record of small-pox mortality prior to 1800 to have roused the suspicions and enlightened the minds of careful and impartial critics ; for here also we find the small-pox mortality which in, for instance, 1763 amounted to 11,662, suddenly falling in the very next year to 4,562, while the most terrible mortality on record, that, namely, of 16,607 in 1778, fell in 1779 already to 5,102, and by 1781 had gone down to 1485. Now if small-pox mortality could fall in this way *without vaccination, before 1800*, what ground could there be for supposing that a similar fall *after 1800* was due to vaccination, even had this been in operation ? But clearly in those days careful and impartial critics were not forthcoming.

But what are we to say of this unlucky coloured plate, of which Dr. Oidtmann forcibly and truthfully

says that the date thereon assigned to the introduction of vaccination into Sweden is a lie? Incredible as it might seem, we can only infer that the compiler was in ignorance,—not perhaps of the date of the Compulsory Vaccination decree in Sweden; that we fear must have been left out of sight by a convenient *suppressio veri*, (though *even* such negligence as not having ascertained *that*, is conceivable to us who know something of official proceedings directed to a specific object) but at any rate—of the date at which vaccination could reasonably have been supposed to become operative in Sweden. We who know what was the nature and rapidity, or rather slowness, of communication with foreign countries in the year 1800 and later on all through the great war, can see at a glance that a medical practice only just beginning at that time to be popular in England (it was only in 1802, and then only by a majority of 3, even under the pressure of royal influence, that Jenner got his first £10,000 voted by Parliament) must necessarily have taken some years to spread to and take such deep root in a distant country like Sweden as to have any appreciable influence—if it did or could ever exercise any anywhere—upon small-pox mortality. But in the year 1857, when the only anxiety of the official compiler was to amass material to justify the tentative Compulsory Vaccination law passed in this country in 1853, to say nothing of more stringent ones looming in the future, we can well suppose that no such reflections, no minute analysis of facts or dates troubled the official mind. There were the figures, and there was the deduction desired to be drawn, nay, so temptingly drawn ready to hand by the Swedish Board of Health, and how could it but be made use of, and the table, without too much exactitude, coloured to convenience at the very best year that could have been pitched on to suit the

deduction? Vaccination might be supposed to be just heard of in Sweden in 1801 (at least there was a Committee appointed to inquire into vaccination in Denmark in that year—and that was near enough for those days)* and down goes the death-rate by one-half! A little more talk of it in 1802, and down goes the death-rate to about one-eighth of the fatal figures of 1800! And as there is almost nothing too preposterous for belief by those determined beforehand to believe, we can and do suppose that this sudden fall was really believed to be owing to vaccination, by the Mr. Haile who prepared this fatal coloured plate, and by Mr. Simon who incorporated it in his Report; whence in later years this recorded triumph of vaccination was extracted by Küssmaul and probably other German pro-vaccinators, and made use of as a chief corner-stone for the edifice of Compulsory Vaccination in the German Empire. We need say no more. The one fact that under the highest possible pressure of Compulsory Vaccination, (for the terrible epidemics on the continent in 1871-2 alarmed Sweden into the most vehement *furore* of vaccination and re-vaccination in 1873) the small-pox mortality of Sweden in 1874 *very greatly exceeded that of 1805 even in proportion to population*, is sufficient to overthrow any allegations in favour of vaccination that could ever have been advanced on the ground of these statistics; while the continuous fluctuations from one extreme to the other, which mark the whole period of the reign of vaccination, serve to render

* Since writing the above we find in a recent publication by Prof. Vogt that in Nov., 1881, vaccination had not been even heard of in Sweden, and that some vaccination experiments were, by royal command, tried in the hospital in Stockholm for the first time in January, 1802! No doubt these hospital experiments did the business!

such allegations absolutely ridiculous ; for if Compulsory Vaccination could bring small-pox down to 2 in 1846, why did it not *keep* it down, instead of letting it run up again to 2488 in 1851 ? Indeed it would be quite as rational to affirm that vaccination *raised* the death-rate in the *second*, as that it *lowered* it in the *first* of these instances. It was equally in operation throughout the whole period, and may just as well be credited with one result as with the other. We trust, therefore,—not that we shall now have heard the last of these famous Swedish statistics in proof of the beneficent effect of the great Jennerian curse ; *that* would be too much to expect from the opponents we have to deal with, but—that we have proved conclusively to every rational and candid reader that *whatever cause may have influenced the decrease of small-pox mortality in Sweden, vaccination can no more have been that CAUSE*, than the sun, moon, and stars which, like it, have looked down on the ever-recurring increase as well as decrease of that dreaded malady.

It is quite true that, when all has been said and done, small-pox mortality is on the whole “considerably less in Sweden now as in other countries—taken on an average of any ten or twenty years—than it was during the last century ; but there are other factors in the case amply sufficient to account for this. In the first place the discontinuance of inoculation, which, as now admitted, spread small-pox broadcast, will account for a vast diminution in the disease it so carefully disseminated ; in the second place the well-known insane medical treatment of small-pox patients formerly practised, has been abandoned, and that was amply sufficient to kill three times as many patients as the disease itself carried off ; while in the third place a wide diffusion of sanitary knowledge and millions spent upon sanitation especially in great towns, should

surely have had some saving influence. And yet—for all this—while the highest small-pox death-rate per million recorded in Sweden, even in the last century (in 1779), was 7,196, the small-pox death-rate in Stockholm, the capital of Sweden, in 1874, amounted, says Dr. Siljeström, to about “8,000 per million!”*—a fact which we beg most liberally to place at the disposal of the *Times*, Dr. Carpenter, Dr. Alfred Carpenter, and all pro-vaccination essayists, lecturers, and fanatics in the kingdom.

MARY C. HUME-ROTHERY.

The Pines, Cheltenham, Oct. 13th, 1882.

* Absolutely rather more, having been 1,206, out of a population of 150,446.

NATIONAL
Anti-Compulsory-Vaccination League.

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